

## best Available Sopy

Application or Dock 1 Number 2

OVA4US3

## EATENT APPLICATION FEE DETERMINATION RECORD Effectiv October 1, 2000

		CLAIMS A	S FILED - (Column	• • • • • •	•	mn 2)		SMALL E	MITTY	OR	- 67	ENTITY
F.,	OTAL CLAIMS		24.				ŀ.	RATE	FEE	1	RATE	FEE
P	N.		NUMBER	FILED	NUX	ER EXTRÀ		BASIC FEE	355.00	OЯ	BASICIE	
TOTAL CHARGEABLE CLAIMS			24 mil	nus 20=	3	4		X\$ 9=		ОЯ	2048	STANCES TO
NO EPENDENT CLAIMS			∠ minus 3 =					X40=		ОП		36/13/
M	ENER DEPEN	IDENT CLAIM P				10	e in	1. 7.7		7.		
· H	If the difference in column 1 is less than reported to in column								2.22	OR		20/1/7/01/57
	A CLAIMS AS AMENDED PART II								2	OR	TOTAL	
1	7 104 (Column 1) (Golumn 2) (Column 3)								ENTITY	OR	OTHER	
ENTA		CLAIMS REMAINING		(HEGH NUM	BER	PRESENT	7	3	ABDI:			ADDI-
		AFTER AMENOMENT		PREVIO		EXTRA		HATE	TIONAL		RATE	TIONAL
<b>7</b>	lotal	· 2H	Minus :	- 2	4	٠		X\$-9≟		OR	X\$18≟	
ME	Independent	.22	Minus	4	Z _			X40=	ļ —	OR	X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM			.405				-
	16	i III is	104 -	Cam	Lat <del>4-</del> i	10		+135=		OR.	+270=	
ŗ	Émic	LT '	104		_			ADDIT, FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)	1	,		<b>l</b> . 1	· .	
8 14		REMAINING AFTER		NUM PREVIO	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
DMENT	Total	AMENDMENT	Minus	PAID	FOR 			3/0.0	FEE			FEE
Z	Independent	. 2	Minus	***	<u> </u>			X\$ 9=		OR	X\$18=	
MA	FIRST PRESE	NTATION OF MI	ILTIPLE DEF	ENDENT	CLAIM			X40=		OR	X80-	
•					,			+135=		OR	+270=	
			•		•		,	TOTAL ADDIT, FEE		ОЯ	TOTAL ADDIT, FEE	
	:• <u>.</u>	(Column 1)		(Colun		(Column 3)		.73.				
SALSE		REMAINING		NUM	BER	PRESENT			ADDI-			ADDI-
		AFTER AMENDMENT		PAID		EXTRA		HATE	TIONAL		RATE	TIONAL FEE
MENDW	Note	•	Minus	**		=		X\$ 9⇒		OR	X\$18#	
Ş	ndependent	•	Minus	***		•		X40=		ÓR	×80≡	
	FIRST PRESE	NTATION OF MU	(LTIPLE DEF	PENDENT	CLAIM		۱۰	- 2		UM,		F3.5
• #	2.5	nn 1 is less than th	e entre la cobe	ma 2 write	Ti' in enti	umn 3.	l	+135=		OR	+270	ie Ž
* 1	I the Trighest Nur	mber Previously Pa mber Previously Pa	H FOR IN THIS	S SPACE IS	less than	20, enter "20."	,	TOTAL ODIT. FEE	]	OR	TOTAL: NODIT. FEE	, A.M.
i	The Highest Num	ber Previously Pal	For (Total or	Independa	nt) is the	highest numbe	r fou	nd in the app	ropriste box	in cot	umn 1.	